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Bib Data Sheet

CONFIRMATION NO. 2640

SERIAL NUMBER 10/730,749	FILING OR 371(c) DATE 12/08/2003 RULE	CLASS 422	GROUP ART UNIT 1743	ATTORNEY DOCKET NO. CDS-0290
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APPLICANTS

David Angelo Tomasso, Rochester, NY;
Raymond Francis Jakubowicz, Rush, NY;
James Vanselow Barry, Rochester, NY;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
03/09/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 6	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>[Signature]</u> Initials <u>[Initials]</u>				

ADDRESS

27777

TITLE

Analyzer having removable holders or a centrifuge

FILING FEE RECEIVED 1270	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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